

FACT SHEET
STATEWIDE 1915(c)
HOME AND COMMUNITY BASED WAIVER
FOR THE
ELDERLY AND DISABLED

The statewide Home and Community Based Services (HCBS) Waiver was approved by the Centers for Medicare and Medicaid Services effective May 1, 2002 to serve 2,871 elderly and disabled individuals. This Waiver is intended to provide a community-based cost-effective alternative to institutional nursing facility care for eligible individuals.

The Commission on Aging and Disability serves as the Administrative Lead Agency for the Waiver, which is administered under the supervision of the Tennessee Department of Finance and Administration, Bureau of TennCare.

ELIGIBILITY

Individuals wishing to enroll in the HCBS Waiver must meet the following requirements:

- 1) Be a resident of the State of Tennessee;
- 2) Meet the financial requirements to receive Medicaid as determined by the Department of Human Services;
- 3) Meet TennCare Pre-Admission Evaluation (PAE) medical criteria for level 1 nursing facility care;
- 4) Be an adult over the age of 21;
- 5) Be able to receive services in the home at a cost less than that of institutional care; and
- 5) Have an adequate social support system to assure the health and safety of the individual while receiving services in a home and community based setting

SERVICES

Individuals enrolled in the Waiver will be eligible to receive all TennCare covered services and the following Waiver services:

- 1) **Case Management** - services which will assist individuals who receive waiver services in gaining access to needed waiver and other State plan services, as well as needed medical, social, educational and other services, regardless of funding source for the services to which access is gained. Case managers shall be responsible for development of the plan of care and for ongoing monitoring of the provision of services included in the individual's plan of care.

2) **Homemaker Services** - services consisting of general household activities and chores (e.g., sweeping, mopping, dusting, making the bed, washing dishes, personal laundry, ironing, mending, and meal preparation and/or education about the preparation of nutritious appetizing meals; assistance with maintenance of a safe environment) and errands essential to the Enrollee's care (e.g., grocery shopping, having prescriptions filled) provided by a trained homemaker when the enrollee is unable to perform such activities and when the individual regularly responsible for these activities is temporarily unable to perform such activities for the Enrollee.

3) **Personal Care Services**- services provided to assist the Enrollee with activities of daily living, and related essential household tasks, and other activities that enable the Enrollee to remain in the home, as an alternative to Nursing Facility care, including the following:

1. Assistance with activities of daily living (e.g., bathing, grooming, personal hygiene, toileting, feeding, dressing, ambulation);
2. Assistance with cleaning that is an integral part of personal care and is essential to the health and welfare of the enrollee;
3. Assistance with maintenance of a safe environment.

4) **Minor Home Modifications** - the provision and installation of certain home mobility aides (e.g., ramps, rails, non-skid surfacing, grab bars, and other devices and minor home modifications which facilitate mobility) and modifications to the home environment to enhance safety. Excluded are those adaptations or improvements to the home which are of general utility and which are not of direct medical or remedial benefit to the individual, such as carpeting, roof repair, central air conditioning, etc. Adaptations which add to the total square footage of the home are excluded from this benefit. All services shall be provided in accordance with applicable State or local building codes.

5) **Personal Emergency Response Systems (PERS)** - PERS is an electronic device which enables certain individuals at high risk of institutionalization to secure help in an emergency. The individual may also wear a portable "help" button to allow for mobility. The system is connected to the person's phone and programmed to signal a response center once a "help" button is activated. The response center is staffed by trained professionals. PERS services are limited to those individuals who are alone for significant parts of the day, who have no regular caregiver for extended periods of time, and who would otherwise require extensive routine supervision.

6) **Home Delivered Meals** - nutritionally well-balanced meals, other than those provided under Title III C-2 of the Older Americans Act, that provide at least one third but no more than two-thirds of the current daily Recommended Dietary Allowance (as estimated by the Food and Nutrition Board of Sciences – National Research Council) and that will be served in the Enrollee's home. Special diets shall be provided in accordance with the Individual Plan of Care when ordered by the Enrollee's physician.

7). **Respite Care** - Services provided to individuals unable to care for themselves when there is an absence or need for relief of those persons normally providing the care. Respite services will be furnished on a short-term basis in a nursing facility or assisted care living facility, not to exceed nine (9) days per waiver year. The intent of Respite is to provide short-term relief for caregiver vacations and emergency situations that may involve the temporary loss of a caregiver (e.g. hospitalization, illness of another relative).

For further information contact, you may call the following toll free number:

1 866 836-6678